



DISTRICT of COLUMBIA COMMISSION TAXICAB
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Adrian M. Fenty, Mayor

Leon J. Swain, Jr., Chairperson, DCTC

FINANCIAL DISCLOSURE FORM

Section 1 – Individual information (type or print)	
Name	
Address	
City, State & Zip	
Social Security #	
Business or Occupation	
Business Name	
Business Address	
City, State & Zip	
Length at present address	
Length of employment	
Res. Phone	
Bus. Phone	

Section 2 – Other Party Information (type or print)	
Name	
Address	
City, State & Zip	
Social Security #	
Business or Occupation	
Business Name	
Business Address	
City, State & Zip	
Length at present address	
Length of employment	
Res. Phone	
Bus. Phone	

Please list all retail locations that you presently operate (Use additional sheets if necessary):

Name of Retail Store	Address	S.F. Leased	Monthly Rent	Landlord Name	Landlord Phone #

Have (either of) you or any firm in which you were a major owner ever declared bankruptcy or settled any debts for less than the amounts owed? If yes, please provide details on a separate sheet.

Yes No

Are (either of) you a defendant in any suit or legal action?

Yes No

Are (either of) you presently subject to any unsatisfied judgments for tax liens?

Yes No

Section 3 – Balance Sheet

Assets	In dollars (omit cents)		Liabilities	In dollars (omit cents)	
	Held individually	Held jointly		Held individually	Held jointly
Cash, Checking & Savings, CD's see Schedule A			Notes payable to banks & others see Schedule G		
U.S. Gov't & marketable securities see schedule B			Installment loans (car, revolving credit, etc.)		
Real Estate Owned see Schedule C			Real Estate mortgages payable see Schedule C		
Accounts, loans & notes receivable			Other Liabilities: credit card		
Automobiles					
Cash surrender value life insurance see Schedule D					
Pension/401K/IRA's see Schedule E					
Business Ventures see Schedule F					
Other assets/personal property Itemize – see Schedule F if applic.					
Total Assets (A)			Total Liabilities (B)		
			Net Worth (A – B)		

Section 4 – Income Statement

Annual Income	(Individual)	Annual Expenditures	(Individual)
Salary, bonuses & commissions		Mortgage/rental payments	
Dividends & interest		Real estate taxes & assessments	
Real estate income		Taxes – federal, state & local	
Other income (alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying the obligation)		Insurance payments	
		Other contract payments (car payments, charge cards, etc.)	
		Alimony, child support, maintenance	
		Other expenses	
Total Income		Total Expenditures	

SCHEDULE A – CASH, CHECKING & SAVINGS ACCOUNTS, CERTIFICATES OF DEPOSIT, MONEY MARKET FUNDS, ETC.

Name of Financial Institution	Type of Account	Owner	(J)	If Pledged, to Whom?	Balance
Total					

SCHEDULE B – U.S. GOVERNMENT & MARKETABLE SECURITIES (Use additional sheet if necessary)

Number of Shares or Face Value of Bonds	Description	In Name of	Are these Registered, Pledged, or Held by Others?	Market Value	Exchanges Were Traded
Total					

SCHEDULE C – REAL ESTATE OWNED (Use additional sheet if necessary)

Description/Location of Real Estate Investment	(J)	Date of Original Investment/Amount	% Owned By You	Market Value of Your % of Investment	Present Balance	Monthly Payment	Mortgage Maturity Date	Mortgage Owed To
Total								

SCHEDULE D – LIFE INSURANCE CARRIED, INCLUDING GROUP INSURANCE

Name of Insurance Company	Owner of Policy	Beneficiary and Relationship	Face Amount	Policy Loans	Cash Surrender Value
Total					

SCHEDULE E – VESTED INTEREST IN PENSION/401(K)/IRA's				
% Vested	Company Name	Account Number	Account Type	Amount
Total				

SCHEDULE F – BUSINESS VENTURES (Use additional sheets if necessary)					
Name	Your Position/Title in the Business	Type of Business	Years in Business	Your % of Ownership	Net Worth of Business
Total					

SCHEDULE G – LOANS OWING BANKS, BROKERS, FINANCE COMPANIES, AND OTHERS (MASTERCARD, VISA, ETC.)							
Owing to (Acct. No.)	(J)	Date of Original Borrowing/Amount	Present Balance	Due	Monthly Payment	Date of Final Payment	Secured By
Total							

The undersigned certifies that the information contained herein is true and correct.

Date signed _____

Signed (individual) _____

Date signed _____

Signed (other party) _____